

Filing Dates and Deadlines

You must submit your complete declaration of candidacy plus the petitions to the office of the City Clerk by 5:00 pm (local time) on the last day of the candidate filing period. (*§50-410, Idaho Code*)

All deadlines are at 5:00 pm (local time).

Candidate Filing Period

| Filing Begins. | • |
|----------------|---|
| Filing Ends: | |

August 18, 2025 August 29, 2025

Withdrawal Deadline

September 5, 2025

The Clerk of the Political District must notify the county within 24 hours of a filing (§34-1404, Idaho Code)

Filing Options

Candidates for city office have two options when filing for placement on the ballot:

| 1. Pay the filing fee | Or | 2. Submit nominating petitions | | | |
|---|----|--|--|--|--|
| City Office: \$ <u>40.</u> ⁰⁰ filing fee | | City Office: <u>5</u> valid signatures of eligible voters within the city | | | |

Completing the Declaration of Candidacy

When completing the Declaration of Candidacy, be sure to complete all fields and questions. Any incomplete or missing information may void your filing.

Section 1: Office Information

Enter the name of the office you are running for and the seat or district number (if applicable). Then enter the name of the city in which you are running.

Section 2: Candidate Information

When entering your Ballot Name, the following will <u>NOT</u> be allowed on the ballot:

- Nicknames that promote a particular political platform or are deemed offensive.
- Professional or military identifiers such as Dr., M.D., PhD., Esq., CPA, Captain, General, etc.

A phone number and email address are both required and will become publicly available upon request.

Section 3: Registered Address

- This <u>MUST</u> be a physical address. P.O. Boxes will not be accepted.
- If your registered address is the same as your mailing address, check the box at the bottom of this section and skip section 4.

Section 4: Mailing Address

• P.O. Boxes are acceptable.

• If your mailing address is the same as your registered address, check the box at the bottom of section 3 and leave this section blank.

Section 5: Homeowner's Exemption

If you or your spouse have claimed a Homeowner's exemption, list the address in this section.

Section 6: Campaign Finance

If your campaign finance contributions or expenditures exceed \$500, you <u>MUST</u> create a campaign finance account with the Idaho Secretary of State.

Visit <u>sunshine.voteidaho.gov</u> for more information.



DECLARATION OF CANDIDACY CITY OFFICE

Candidate Filing Period

Filing Begins: Aug Filing Ends: Aug

August 18, 2025 August 29, 2025

| Office name | 1 | Filing for the office of Seat / District (if applicable) | | | | | | | | | |
|--|------|---|---|---|-----------|-----------------------|--|-----------------------|---|------------|--|
| | • | City _ | | | | | | | | | |
| Candidate information Enter your name as it appears | | | | First name Middle name Last name Suffix (if applicable) | | | | | | | |
| Enter your name as you would like it to appear on the ballot. | 2 | Ballot NOTE: Profess | Ballot name NOTE: You may not use nicknames that promote a particular political platform or are deemed of Professional or military identifiers (Dr., M.D., PhD., Esq., CPA, Captain, General, etc.) are also not | | | | | d offensi ot allow | offensive. ot allowed on the ballot. | | |
| Enter your phone number and email address. | | Phone NOTE: | number Your phone number and er | mail address | Email add | ress d and will be | ecome publicly avo | ailable up | oon re | quest. | |
| Registered address Must be a street address. P.O. Boxes are not allowed. | 3 | City _ | ss (not P.O. Box) mailing address is the sar | | | State _ | Zip | | | # | |
| Mailing address Provide the address where you receive mail. | 4 | | ss or P.O. Box | | | | Zip | | | # | |
| Homeowner's exemption If you or your spouse have claimed a homeowner's exemption, provide the address. | 5 | Addres | my spouse have claimed a | | | | | | | # | |
| Campaign finance Choose only one option. | 6 | Car | ave already created a npaign Finance account d appointed a Treasurer. | Or | or exceed | \$500, I will | ice contributions create a Campai <u>c</u> if State and appo | gn Finan | ice acc | count with | |
| Signature Re-enter the city name, office, term length, and your residence address. | 7 | I, the undersigned, affirm that I am a qualified elector of the Cit that I have resided in the city for at least thirty (30) days. I hereby declare myself to be a candidate for the office of be voted for at the election to be held on the <u>4th</u> day of <u>Novem</u> qualifications to fill said office, and that my residence address is | | | | | , for a t | erm of _ | | years, to | |
| | | Candie X | date, sign and date here | (Required) | | | Data (nam (dd)) | | / | 1 | |
| State of Idaho | | | Nota | ry Use Onl | у | | Date (mm/dd/y | ууу) | 1 | | |
| State of Idano County of This record was signed before by Notary Signature Notary Printed Name My Commission Expires | Prin | n t name of | signer(s) | | , | | Place Notary Seal | Above | | | |

| HILLS THE OF 19 |
|-----------------|
|-----------------|

PETITION FOR CANDIDACY CITY OFFICE

Candidate Filing Period

Filing Begins: Filing Ends: August 18, 2025 August 29, 2025

| Office name | | Filing fo | or the office of | | Se | at / District (if applicable) | |
|-----------------------------|----------|--|--|---|---|---|----------------------------------|
| | 1 | City | | | | | |
| Candidate name | | Ballot r | name | | | | |
| | 2 | | Enter the candidate's na | | | | |
| 5:00 p.m. on the te | nth Frid | ay before | | omitted petition m | | n Monday and no later th ereto the names of at lea | |
| Petition signatures | 3 | I, the undersigned, being a qualified elector of the City of, in the State of Idaho, do hereby certify and declare that I reside at the place set opposite my name and that I do hereby join in the petition of, a candidate for the office of | | | | | |
| | | to be vo | oted at the election to b | be held on the <u>4th</u> d | ay of <mark>November</mark> , <u>202</u> | <u>25</u> . | |
| Signature of Petition | er | | Printed Name | | Residence Addre | 255 | Date Signed |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |
| 5. | | | | | | | |
| | | | | | | | |
| 6. | | | | | | | |
| 7. | | | | | | | |
| 8. | | | | | | | |
| Circulator Signature | 4 | eightee name t that ea | en (18) years of age; that hereto in my presence; | every person who s I believe that each h elector of the State o | signed this sheet of th as stated his or her n | resident of the State of Ida ne foregoing petition signe ame and residence addres of | d his or her s correctly; and |
| | | x | | | | Date (mm/dd/yyyy) | |
| | - | | No | tary Use Only | | | |
| State of Idaho County of | | | | | | | |
| This record was signed befo | re me o | n | | , | | | |
| by | Prin | t name of s | signer(s) | · | | | |
| Notary Signature | | | | | | | |
| Notary Printed Name | | | | | | | |
| My Commission Expires | | | | | | Place Notary Seal Above | |